

# Free Care

Number 3/Fall 1999

Answering your questions about the  
Massachusetts Uncompensated Care Pool

## Notes

This newsletter is intended to answer questions about Free Care eligibility, and to help hospitals and community health centers understand the free care eligibility regulation, 114.6 CMR 10.00.

If you have questions about free care eligibility, please contact the Division of Health Care Finance and Policy at 617-988-3222.

Please share this newsletter with everyone at your facility who assists patients with free care applications.

### *MassHealth Limited*

Some people who apply for free care may be eligible for MassHealth Limited. All Massachusetts residents who meet the financial and categorical requirements of MassHealth are, at a minimum, eligible for MassHealth Limited, regardless of their immigration status. MassHealth Limited covers only medical emergencies, including inpatient and outpatient hospital emergency services; labor and delivery; certain services provided by doctors and clinics outside of a hospital (such as community health centers); and both pharmacy services and ambulance transportation for emergency medical conditions. People who apply for MassHealth Limited are not required to provide a Social Security Number, and are not required to complete Supplement D of the MBR. In May 1999, the federal government issued new "public charge" guidelines outlining when receiving public benefits may affect an immigrant's status or ability to travel outside of the U.S. Using MassHealth, the Children's Medical Security Plan, Healthy Start, WIC, free care, or other health care benefits will not make a person a public charge unless the benefits are used to pay for long-term care (such as chronic care and rehabilitation facilities and nursing homes).

Providers should screen *all* patients for MassHealth Limited eligibility *even if* MassHealth Limited would not cover the services that the patient receives that day because the patient will have better coverage if an emergency occurs in the future. Providers should both encourage the patient to apply and assist with the application process. To apply for MassHealth Limited and free care at the same time, the patient simply needs to complete an MBR and a condensed free care application and supply the required documentation. If a patient is covered by MassHealth Limited, providers must bill MassHealth first for any covered emergency services. The Pool may be billed for services not covered by MassHealth.

### *Revised Free Care Application Forms*

The Division recently made some minor revisions to the free care application forms. We have distributed the revised forms by mail, and posted them to our web site. The changes mainly consist of some additional screening questions and wording changes to make the forms easier to use. We are also updating the free care application guide to incorporate these changes. Providers may begin using the revised application forms immediately. All providers will be required to use them by January 1, 2000. The Division adopted some minor technical changes to the free care regulation. Because these changes are mainly technical, providers are not required to resubmit their credit and collection policies to the Division for review. However, they are required to ensure that their policies are in compliance with the regulation.

### *Data Collection*

Starting next year, the Division will begin collecting free care applications and UB92 claim forms for all services billed to the Pool. The Division plans to pilot the electronic free care application with several hospitals by the end of this year. Several providers participated in a workgroup to offer feedback and suggestions on the application design and functionality. The screen layouts and technical specifications for the electronic application are available for review on the Division's Web site. More information about the implementation of the electronic application will be distributed as it becomes available.

The first phase of the claims collection project requires the Division to develop specifications for providers in order to prepare billing systems for submitting claims to the Division. The Division is aware that providers require significant advance notice for preparing internal systems to generate claims, and will soon convene a provider workgroup to assist with identifying issues that must be considered when drafting specifications. Claims collection will be piloted with several providers before statewide implementation. Claims are being collected for data analysis and reporting purposes only, not for adjudication.

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# Qualifying Student Health Insurance Program

The Division of Health Care Finance and Policy web site has a section dedicated to the Qualifying Student Health Insurance Program. The site includes a list of frequently asked questions, a universal enrollment and waiver form, and a list of web site addresses for Massachusetts colleges and universities. If you have additional questions about this program, please call 617-988-3100 or 1-800-888-2250, or via email at [studenthealth.help@state.ma.us](mailto:studenthealth.help@state.ma.us).

Free Care Notes  
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 **Are you the correct contact person at your site for this information? Are your name and address correct?**  
Please note any changes directly on this label and send to the address above or fax to Dorothy Barron at (617) 727-7662.

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# Student Health Insurance

Massachusetts law requires all full and part-time (greater than 75% course load) college and graduate students to purchase health insurance through their school or provide evidence to the school that they have other comparable health insurance (114.6 CMR 3.03). Colleges and universities must enforce this law. Since free care is not health insurance, students cannot waive participation in their school's health insurance program based on their eligibility for free care at a hospital or community health center. Students cannot apply for free care as an alternative to purchasing their school's health insurance plan. Students may apply for free care only to pay for deductibles, balances after insurance, and medically necessary services not covered by their health insurance policy. If you have additional questions, please call 617-988-3106.